

Muskogee County Emergency Medical Service 1-918-683-0130 or 1-800-372-8008



## Redact HIPPA Patient Care Report

## Patient Information

Age: 16 Years

Gender: Male

Race: White

## Call Type / Disposition

Response type: 911 Response (Scene)

Disposition: Patient Dead at Scene-No Resuscitation Attempted (Without Transport)

Complaint by Disp: 9 Cardiac Arrest/Death  
EMD Card Number: 9-E-3

Response Delay: None/No Delay

## Call Location

Incident Location: Scene Of Emergency  
Incident Address: 305 E CINCINNATI  
City of Muskogee, OK 74401

## Patient Condition

## Complaint

DOA

Primary Symptom: Obvious Death  
Other Symptoms: Not Applicable  
Alcohol/Drug Use: None Reported

## Provider Impression

Primary Impression: Dead on Arrival (DOA)

Secondary , Cardiac arrest  
Impression:

## Narrative

Narrative: 16 Y/O MALE PT CC- DOA

PT WAS IN JUVENILE DETENTION FACILITY AND GUARDS STATED THAT PT SHOWERED APPROX 1830-1900 AND THEN WAS LOCKED UP IN CELL. GUARDS WENT TO CHECK ON PT AND THEY FOUND THAT HE HAD HUNG HIMSELF AND CALLED 911.

PT UAA WAS LYING FACE DOWN, UNRESPONSIVE, GCS 3, LIVIDITY NOTED TO UPPER AND LOWER EXT, PT HAD HUNG HIMSELF WITH A SHEET FROM RAILING ON SINK APPROX 2 FT FROM GROUND,

PT WAS ASYSTOLE ON MONITOR, PT WAS NOT MOVED,

PD CAME AND TOOK OVER PT, SCENE WAS MARKED OFF AS POSSIBLE CRIME SCENE AND PT WAS RELEASED TO OFFICER HAMLINS, SIGNATURE OBTAINED.

## Medical Necessity

ALS Assessment Yes, to determine ALS needs

Performed and  
Warranted:Patient moving / None  
lifting device used:

## Past Medical History

Medical History: None Reported



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Personal Physician: NA

		<u>Activities</u>			
		<u>Medications</u>			
		<u>Procedures</u>			
Time	Name			Success	Attempts
2016	ECG Monitor applied (4-lead or Pads)			Yes	1

  

<u>Vitals</u>							
Time	Pulse	ECG Rhythm	Resp	SpO2	GCS	Pain	
/2016	0	Aystole	0	0	3	0	

Response Times and Mileage

PSAP:	/2016	Start Odom:	0	Miles to Scene:	0.0
Disp. Notified:	/2016	Scene Odom:	0	Loaded Miles:	0.0
Unit Disp.:	'2016	Dest. Odom:	0	Total:	0.0
Enroute:	/2016				
At Scene:	/2016				
At Patient:	/2016				
Depart:	/2016				
In Service:	/2016				

Unit PersonnelRole

Primary Patient Caregiver

Other Patient Caregiver, Driver

Wave forms

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Time: 2016

Name: ID: Patient ID: Incident ID: Location: Age: 16 /2016	Initial Rhythm Sec M	I SpO2+PR SpCO SpMet
<b>Initial Rhythm</b> <p>1x1.0</p> <p>III x1.0</p> <p>SpO2</p> <p>SpO2 Check Sensor</p> <p>Physio-Control, Inc.</p>		
		LP15-20 MUSKOGEE EMS 3313494-009 LP1543704614
25mm/sec ECG 5-40Hz Paddles 2.5-30Hz		

Time: /2016

Name: ID: Patient ID: Incident ID: Location: Age: 16 /2016	Print 1 Sec M	HR SpO2+PR SpCO SpMet
<b>Print 1</b> <p>1x1.0</p> <p>III x1.0</p> <p>SpO2</p> <p>SpO2 Check Sensor</p> <p>Physio-Control, Inc.</p>		
		LP15-20 MUSKOGEE EMS 3313494-009 LP1543704614
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Attachments

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